## Montana Medicaid - Fee Schedule Children's Special Health Services (CSHS) Interdisciplinary Teams July 1, 2014

## **Definitions:**

**Description** – These are procedure codes that meet interdisciplinary teams qualifications for:

Childrens Special Health Services (CSHS) is a bundled service that utilizes Cleft/Craniofacial Interdisciplinary Teams

Childrens Special Health Services (CSHS) is a bundled service that utilizes Metabolic Interdisciplinary Teams

Childrens Special Health Services (CSHS) is a bundled service that utilizes Cystic Fibrosis Interdisciplinary Teams

**Method** - Source of fee determination

Fee Sched: Medicaid Fee

\*If a valid, current code is not present, that code may be a non-covered service

Fees Valid for PT 70

PA - Prior Authorization

Y: Prior authorization is required

Space - Prior Authorization is not required

Pass - Passport Referral

Y: Passport referral is required

Space: No passport referral required

Passport- Not all provider specialties require passport, please refere to yoru program manual for specifics

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Proc	Modifier	Description	Effective	Method	Fee	PA	Pass
T1024		TEAM EVALUATION & MANAGEMENT	7/1/2014	Fee Sched	\$100.00		
T1025		PED COMPR CARE PKG PER DIEM	7/1/2014	Fee Sched	\$1,000.00		